Utah State Tax Commission - Motor Carrier Services Telephones: (801) 297-6800 or 1-888-251-9555; Fax (801) 297-6899

LG-Log Truck

DT-Dump Truck

WK-Wrecker/Tow Truck

## **Original Application - Schedule A**

International Registration Plan - Motor Carrier Services

TC-852 Rev. 6/02

Name of appl	icant						Bu	Business telephone number							License year Fleet				Account number		ircle one				
Business street address (where records are kept - must be a Utah address)									Mailing street address								Person to contact regarding application								IUN 30
City County State ZIP code				Cit	City State ZIP code							City State						Fax number				SEPT 30			
UT				,						,	·										DEC 31				
Type of operation (check the ONE that applies)  Common carrier  Contract carrier  Private Carrier  Rental Contract Carrier						Compa	any	Utah Exempt		Property Tax Exempt Organization				Previously author another jurisdiction						Do you currently have Wyor intrastate operating authorities				Yes No	
Registere	<b>d Weights (</b> list or	this sched	ule only t	the units tha	at will o	perate	at the	e same we	eight in the I	RP ju	risdictions - if trav	eling in Queb	ec, list the	total comb	ined ax	les for p	ower	units/	trailers and	the gross	weigh	nt for	buses)		
AB	AK AL AR		AZ	AZ		)	CA	A CO		СТ	DC	DE		FL		GA		HI		IA		ID			
IL .	IN	KS	KY	LA	LA		MA MB		3	MD	ME	MI	MN		МО	O MS		S MT			MX		NB		
NC	ND	NE	NF	NI	NH		NJ NN		И	NS	NT	NV	NY		ОН		ОК		ON	ON OR		F			
RI	PR	QB	SC	SI	SD		SK TN		I	TX	UT	VA	VT		WA V		WI		WV	WV WY		′ Y			
Equipment Vehicle Identification number number				Тур	e Ma	Make Year		Unladen weight			Name of owner		Date of purchas			ctory %	Less than 10K/miles Plate Title		License plate number	USDOT			Dealer name of previous licens number year		
											44														
license disp	lay requirements as	specified in	the Interna	ational Regis	tration F	lan. I ur	iderst	and that fai	lure to compl	y with	** Will the control an the provisions, shal ue, correct, and con	II be grounds to	r revocation	of my regist	e assigne rations	iii previ	ousiy p	rorateu	arrier during the in another state count number	e registratior e provide	year by	/ lease1	?_ <del>↑</del> SDICTION	I USE ONL	.Y
	al Fuel/IFTA: I here	by certify tha	t I have qu	•	he Utah	State Ta					reports as required,	•									HVUT	/erified			
Signature	nature				Date sign			ned Insurance company			name		Policy number				Federal identification number				I/M verified				
Type key:	TK-Truck (single)	TR - Tracto	r	BS-Bus		CG-	Conve	rter Gear	Fue	el Key:	D-Diesel	P-Propane	GH-Gasoh	ol											
	TL-Full-Trailer or Semi-Trailer	TT-Truck/Ti		RT-Road				Bottoms			G-Gasoline	N-Natural													